

NAF HBP Benefits Information

Issue 9

Prescription Drug Coverage

What is the difference between generic drugs and brand name prescriptions? What is it costing you? Recent marketing campaigns from the pharmaceutical companies make us think that name brands are better, right? Not necessarily. Prescription drugs can be expensive, but as an informed consumer you can make better decisions on how to spend your dollars.

While generic drugs use the same active ingredients and affect the body the same as their brand-name equivalents, brand-name prescriptions cost you more money.

The brand name of a drug is the name under which it was originally marketed, and is protected by patent for up to 20 years. When this patent expires, other manufacturers can produce the generic equivalent of the brand and sell it under its generic name. In general, the cost to the consumer immediately drops by 20 to 30 percent. Within two years, the price is usually up to 60 percent less.

For example, with the NAF HBP's 3 tier prescription drug benefit you have a choice on how to spend your money towards prescriptions. Take Minocin (antibiotic) for example. Minocin, costs approximately \$70.38, which you'd pay the \$30 co-pay under the NAF HBP

plan since the drug is not on the Aetna formulary. For the generic version Mino-cycline (same antibiotic) it costs approximately \$49.60. In this case, the \$10 co-pay would apply.

Prescription drugs not on the Aetna formulary have a \$30 co-pay under the 3 Tier prescription drug benefit. The Aetna formulary is simply their list of preferred prescription drugs approved by the Food and Drug Administration. Brand name drugs are a \$20 co-pay and all generic drugs are a \$10 co-pay. You may find the Three-Tier/Open Formulary at www.aetna.com/formulary/index.html. You may also want to bring a copy of the formulary with you to your physician to find the best cost for the prescription you need.

Aetna Navigator

What is Aetna Navigator? Aetna Navigator is a powerful online tool that provides you with your health and benefits information at your fingertips - 24 hours a day, 7 days a week. In one easy-to-use website, you can perform a number of self-service functions related to your health benefits plan and take advantage of a vast amount of medical and dental consumer health information from IntelliHealth[®], Aetna's online



Compare generic, name brand, and other prescription drug pricing on-line at www.aetna.com once you register for Aetna Navigator.

consumer health information backed by Harvard Medical School and the University of Pennsylvania School of Dental Medicine. When you register for Aetna Navigator, even more features become available to you, such as access to benefits, claims and coverage information - all included at no cost.

It's easy to use and easy to register. To register, visit www.aetna.com and click on Aetna Navigator. Choose a user name and password and then be able to immediately use all the tools available to you as an Aetna NAF HBP participant.

Dental Plan pays 95% Reasonable and Customary Fees

The NAF Passive PPO Dental plan covers out-of-network dental charges at 95% of Reasonable and Customary charges (R&C) versus 85%.

How the plan works: You may visit a dentist participating in the Aetna network for in-network savings or choose your own dentist not in the Aetna plan.

In-Network dentists are paid on the basis of negotiated fees for dental work with Aetna, which are typically lower than Out-of-Network R&C charges. Out-of-Network dentists are paid based on what is Reasonable

and Customary for the dental work you received. Raising the R&C percentage with Aetna saves you money on the out-of-network charges, as Aetna will pay 95% of the R&C charge while you pay the deductible and 5%. Seeing an in-network dentist saves you money.

For example:

Out-of Network Filling
Dental Work: \$80 R&C

If Aetna pays at **85% R&C** cost = \$68.00

If Aetna pays at **95% R&C** cost = \$76.00

and 80% of deductible = \$60.80

You pay deductible, Basic dental work 20% or \$15.20

You pay **5% of R&C** cost = \$4.00
Total cost for Filling paid by you = \$19.20

Additional Information on your dental plan and locating dentists in the Aetna network may be located from Aetna Navigator, Aetna's website: <http://aetna.com>.

